

GIC Health Plan Rates – Monthly Rates as of July 1, 2009

For GROTON-DUNSTABLE REGIONAL SCHOOL DISTRICT ENROLLEES



Active Employees, Retirees, and Survivors *WITHOUT MEDICARE*

Includes 0.33% Administrative Fee



	Employee and Non-Medicare Retiree/Survivor Pays Monthly %	Employee and Non-Medicare Retiree/Survivor Pays Monthly \$	Employee and Non-Medicare Retiree/Survivor Pays Monthly \$
HEALTH PLAN		Individual Coverage	Family Coverage
Fallon Community Health Plan Direct Care	15%	\$ 60.86	\$146.06
Fallon Community Health Plan Select Care	15%	\$ 73.80	\$177.11
Harvard Pilgrim Independence Plan	15%	\$ 78.94	\$191.06
Health New England	15%	\$ 64.67	\$160.29
Navigator by Tufts Health Plan	15%	\$ 77.86	\$187.61
NHP Care (<i>Neighborhood Health Plan</i>)	15%	\$ 62.52	\$165.69
UniCare State Indemnity Plan/Basic <i>with</i> CIC (<i>Comprehensive</i>)	50%	\$383.78	\$895.90
UniCare State Indemnity Plan/Basic <i>without</i> CIC (<i>Non-Comprehensive</i>)	50%	\$366.02	\$854.69
UniCare State Indemnity Plan/Community Choice	50%	\$205.64	\$493.53
UniCare State Indemnity Plan/PLUS	50%	\$266.22	\$635.33

Retirees and Survivors *WITH MEDICARE*

	Retiree and Survivor Retiree/Survivor Pays Monthly Per Person	
HEALTH PLAN	%	\$
Fallon Senior Plan*	35%	\$ 70.06
Harvard Pilgrim Medicare Enhance	35%	\$122.49
Health New England MedPlus	35%	\$127.17
Tufts Health Plan Medicare Complement	35%	\$112.57
Tufts Health Plan Medicare Preferred*	35%	\$ 62.33
UniCare State Indemnity Plan/Medicare Extension (OME) <i>with</i> CIC (<i>Comprehensive</i>)	35%	\$123.54
UniCare State Indemnity Plan/Medicare Extension (OME) <i>without</i> CIC (<i>Non-Comprehensive</i>)	35%	\$119.83

* Rates are subject to federal approval and may change January 1, 2010.

Rates are Calculated by the Groton-Dunstable Regional School District Human Resources Office.

Rate questions? Call: Pam Verrill at Borislow Insurance 978.722.1107